# **2021 Air Infiltration Rebates**

APPLICATION FORM



All rebate applications are due by January 15th the year after equipment purchase and installation.

	1	EPE CUSTOMER INFORMATION				
In order to be eligible for rebates, rebate forms may be completed online or mailed along with a copy of receipt or contractor invoice to the address below.  Rebate processing takes approximately 4–6 weeks. Terms and conditions subject to		EPE Account Number for Install Location: (10 digits)  Customer/Business Name:  Telephone:  Applicant's Email:*  Account Address:  City:  State:  ZIP:				
change without notice.  EPESaver Rebate Center 1515 S Capital of Texas Hwy, Suite 110 Austin, TX 78746 www.epesaver.com		Mailing Address: (if different)**  City:  State:  * Email rebate correspondence will be sent to the email address specified in this field  ** Rebate check will be mailed to the account address unless a different mailing address is provided				
	2	INSTALLATION INFORMATION (Must complete all fields)				
Weather Stripping and Door Sweeps  Pre-retrofit gap width must be verified by providing photo evidence of the gap measurement		Cooling Type: (Check one)  Split/Pack. AC  Water-Cooled Chiller  Evaporative Cooler  None  Heating Type: (Check one)  Gas  Electric Resistance  Heat Pump  None  Length of Installed Weather Stripping or Door Sweep by gap width:  1/8"  1/4"  1/2"  3/4"				
Refrigerated Door Gaskets		Length of Installed Door Gasket (ft) for Walk-in or Reach-in Cooler:  Length of Installed Door Gasket (ft) for Walk-in or Reach-in Freezer:				
	3	CONTRACTOR INFORMATION				
		Company Name:  License #: (if applicable)  Contact Person:  Phone:				

**New Mexico Commercial** 

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### 4 APPLICANT ACKNOWLEDGEMENT

Please refer to EPESaver.com for additional information regarding eligibility criteria

(Signed by EPE customer if owner occupied or landlord if renter occupied)

Applicant Signature: Date:

### 5 PAYMENT RELEASE AUTHORIZATION

#### **OPTIONAL**

(Property owner must complete and sign only if rebate is to be issued to contractor)

By signing below, I am authorizing the payment of the rebate to the contractor (named below), and I understand tha I will <b>NOT</b> be receiving the incentive payment from El Paso Electric.							
Applicant Signature:			Date:				
Contractor Company Name: (for payment)							
Mailing Address:							
City:		State:	ZIP:				